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Space Administration



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Nutrition and Space Flight

Research DPG

Disclosure: No Conflicts of Interest

Physiological Adaptations to Spaceflight

Psychological/Behavioral/Performance

Neurosensory adaptations

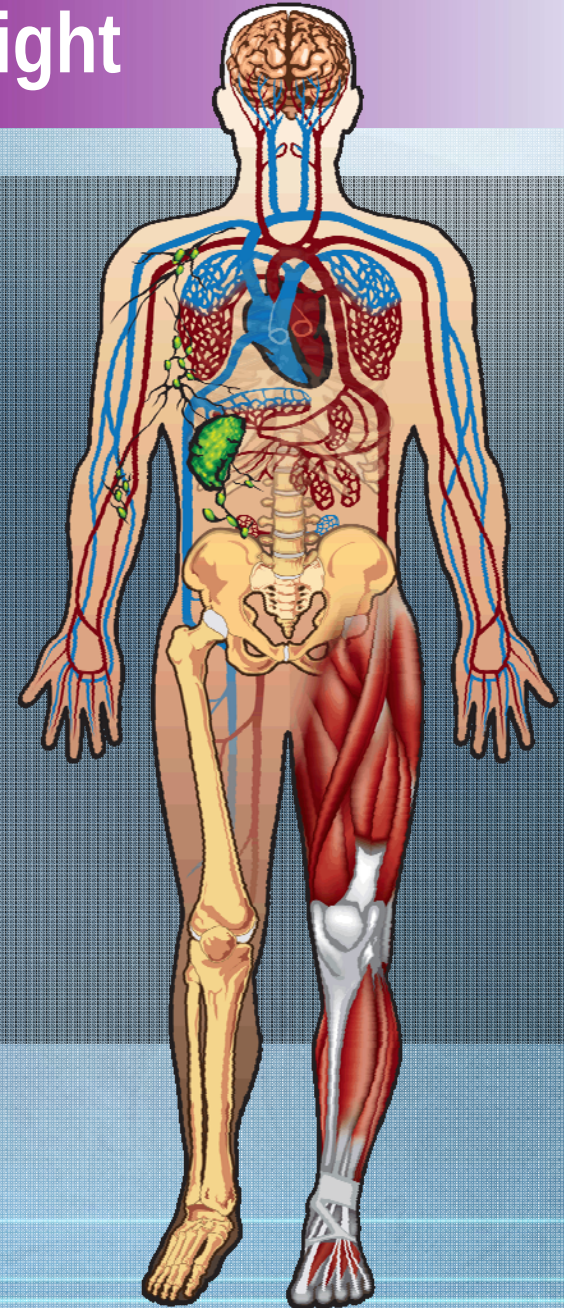
Cardiovascular adaptations

Fluid shifts, hematological changes

Musculoskeletal changes

Gastrointestinal alterations

Taste and odor sensitivity



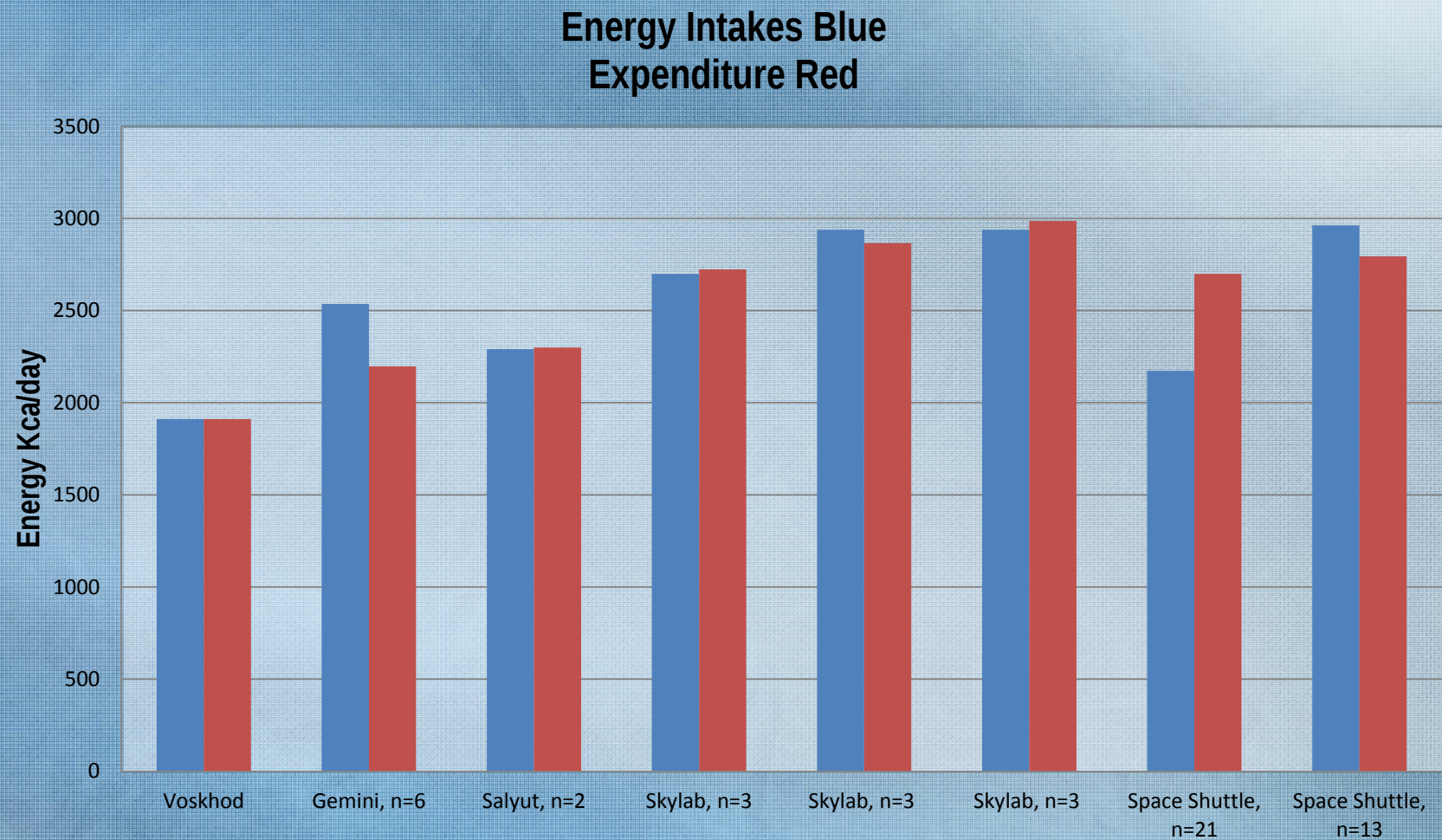


ENERGY
intake

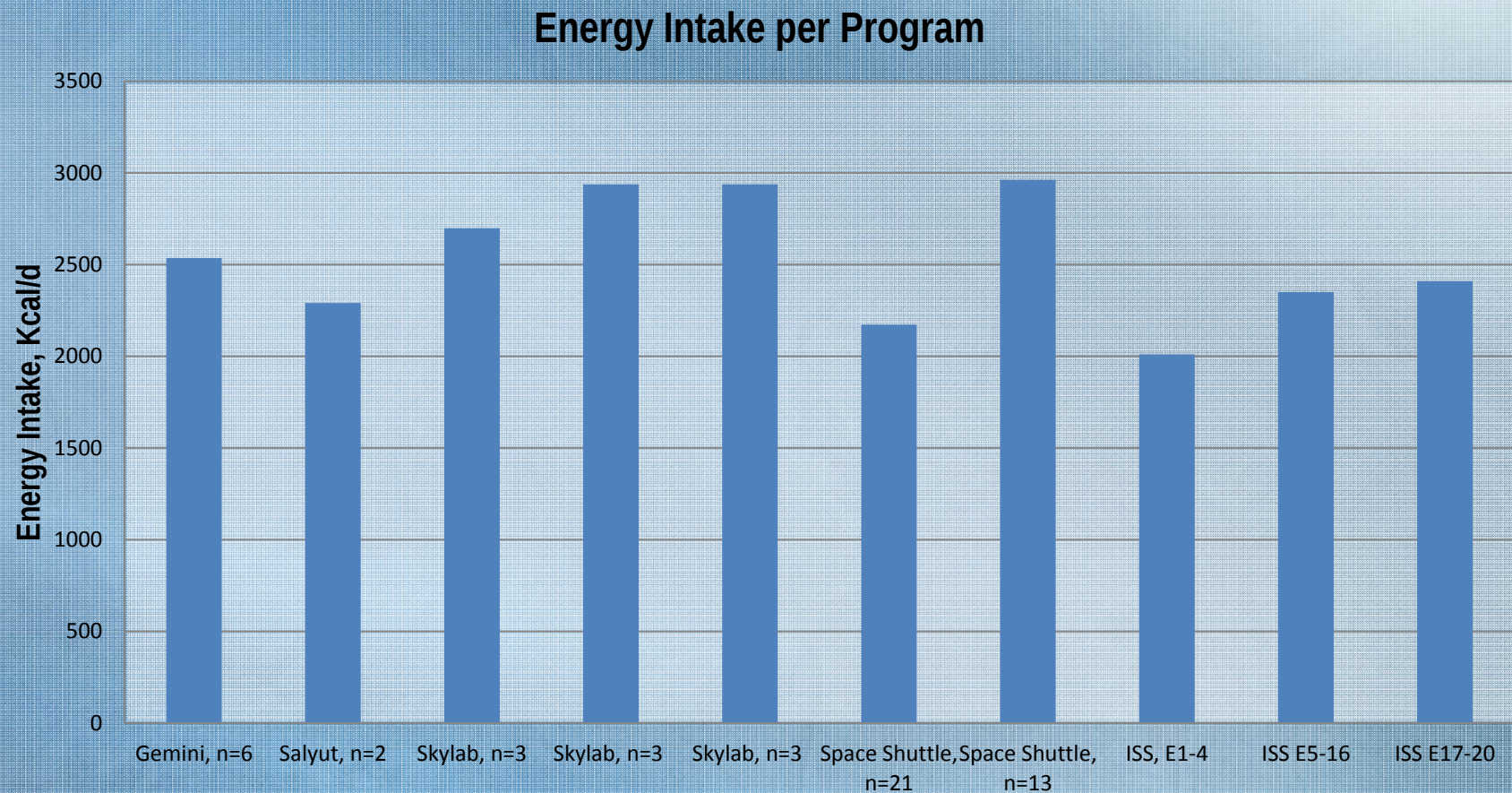
A balance scale is centered in the image. The left pan is slightly higher than the right pan, indicating it is lighter. The scale is set against a blue background with a faint grid pattern. The text 'ENERGY intake' is positioned on the left pan, and 'ENERGY utilization' is on the right pan. The scale's shadow is cast to the left.

ENERGY
utilization

Energy Intake and Expenditure



Energy Intake per Program



Energy Consumption for Exercise

Space shuttle flights, O_2 consumption as l/min measured to determine fitness - oxygen consumption per standard exercise level: 5 subjects during space shuttle flight.

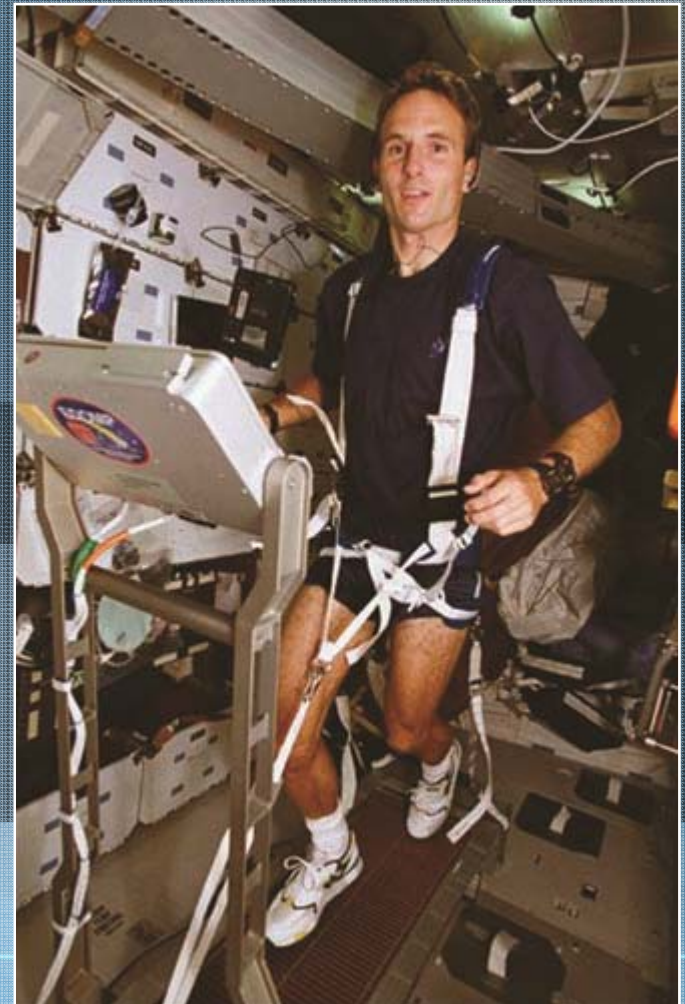
Preflight

2.05 ± 0.12

In-flight

1.86 ± 0.12

Was there a training effect?
Studies on-going



Fluid Intake During Space Flight

Fluid Balances as ml/day

Apollo	Skylab	Shuttle
1647 ± 188	2829 ± 529	2223 ± 669

Early space flight assumed weight loss due to fluid balance, primarily a diuresis effect of microgravity.

Research completed by USSR, European, and US to the effect on the cardiovascular system and the orthostatic intolerance that occurs at landing.

Changes in body water, Skylab and Space Shuttle measured in flight

Program Name	Extracellular Fluids % change	Plasma Volume% change*	Body Mass % change
Skylab, n=9	- 7.2 to 10..2	-10 to -15	-1 to 5
Space Shuttle, n=20	-10 to -14	-10 to -17	0 to -1.5
Mir, n=5	-7 to -8	-9 to -10	-4 to -12

**Related to the orthostatic intolerance at landing.*

Fluid Balances: Why did these changes happen?

Skylab studies provide the best answer: all nine crewmembers excreted less urine, mean 400 ml less per day than preflight and water intake decreased 700 ml/d.

Russians and US also showed increase osmolality of in-flight urine. Until the Space Shuttle flight water had to be launched, for some program managers this reduced consumption was a plus.

Water turn over using double label water with 14 shuttle astronauts:

Preflight

3768 $\pm$ 509 ml/day

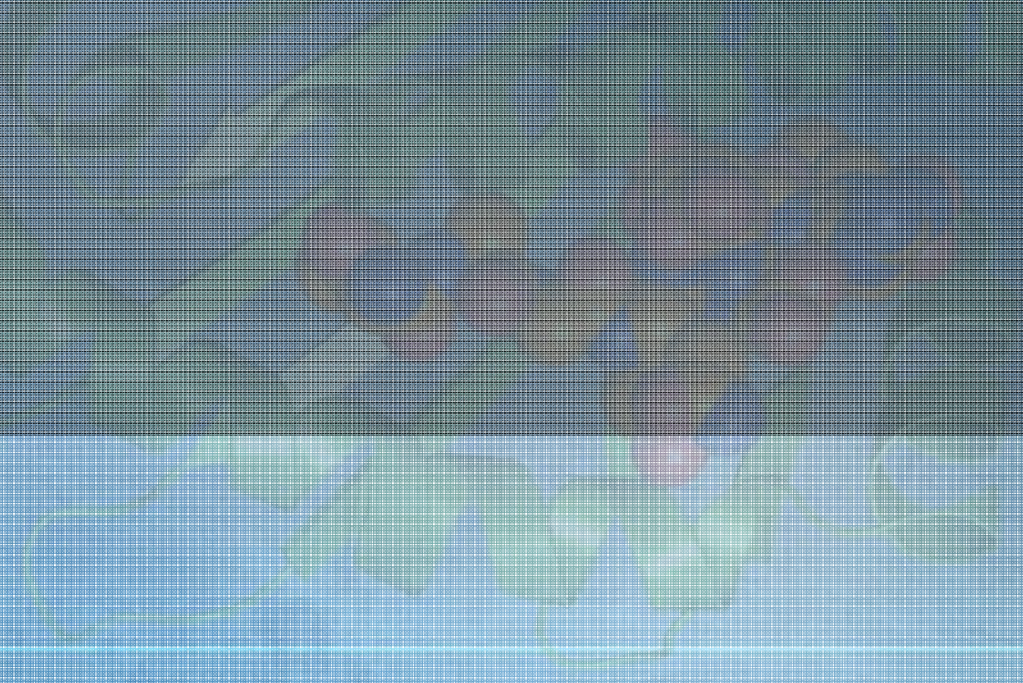
In-flight

2731 $\pm$ 607 ml/day

The decreased plasma volume may relate to the changes within the cardiovascular system, with the head ward shifts of fluids during microgravity, regulatory systems may adjust to lower blood volume of space flight. As of yet, except for landing day, this has not cause problems in space flight. However, there are still active questions, esp. for extended durations with many crew members as with ISS.

Protein Requirements

Protein intakes are complicated by early observations that high protein diets maybe related to renal stones. Astronauts consume less than ideal water levels and with the concentrated urines, was there an increase of bone loss and renal stones?



Changes in Muscle Volume

Deconditioned muscles including decreased leg volume due to inability to load muscles in microgravity

Muscle	% Change	
	R+1	R+15
Calf		
Anterior	-3.9 ± 0.5^a	-3.3 ± 1.1^b
Soleus+Gastroc	-6.3 ± 0.6^a	-4.4 ± 2.2^b
Thigh		
Quadriceps	-6.0 ± 1.7^b	-3.1 ± 2.3
Hamstrings	-8.0 ± 0.9^a	-4.8 ± 1.3^a
Lumbar		
Intrinsic	-10.3 ± 2.4^a	-5.9 ± 1.5^a
Psoas	-3.1 ± 1.5	-2.4 ± 1.6

Changes in Muscle Volume of Four Astronauts 1 and 15 Days After an 8-Day Space Shuttle Mission

^ap<0.05

^bp<0.07 versus preflight

R = recovery day

% change = flight vs. preflight

Protein Requirements

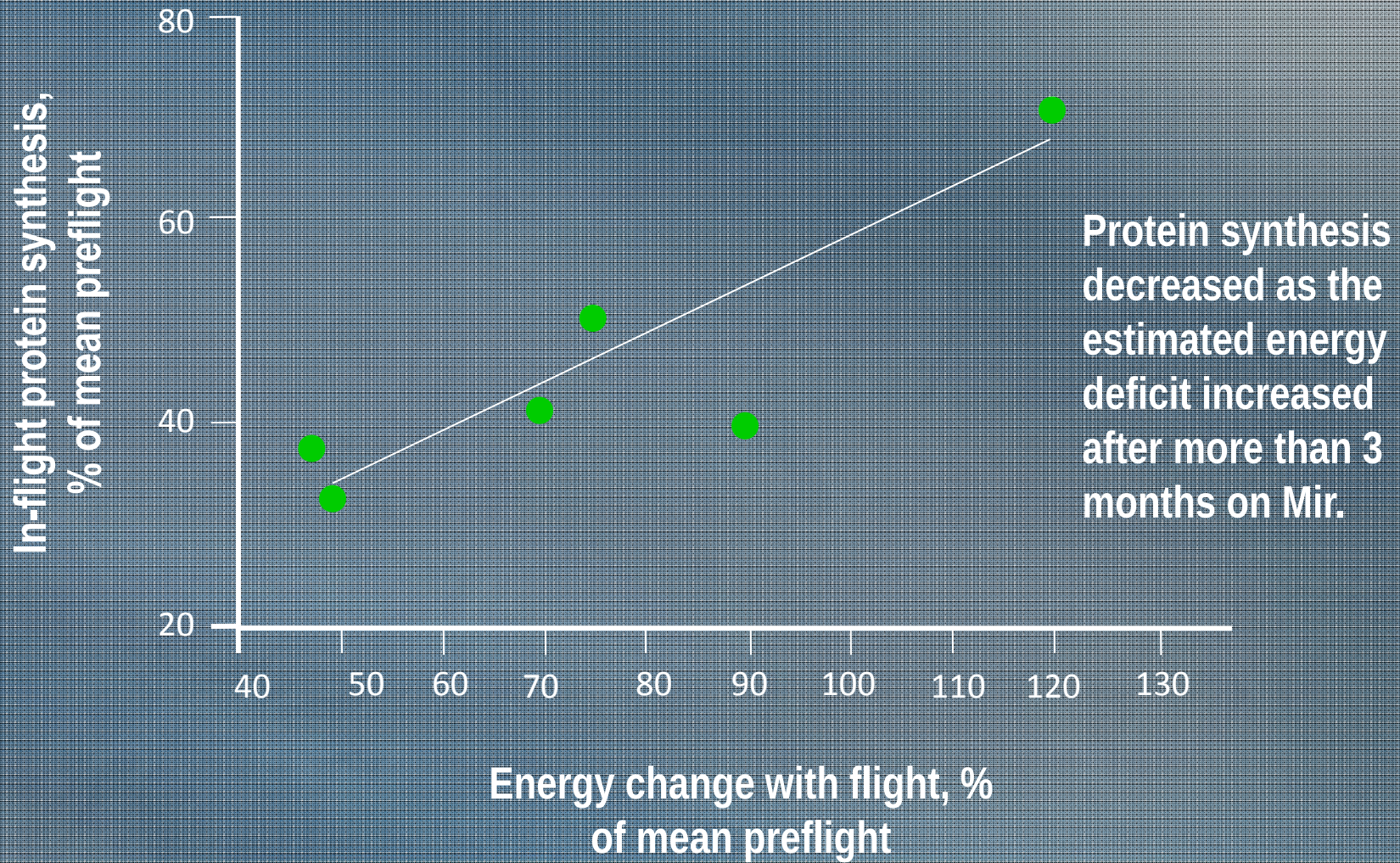
Historically, muscle loss was a significant issue for crew members especially after landing.

Both muscle volume, especially in the weight bearing legs and strength decreased with several studies showing changes in the muscle fibers.

Question: Can dietary protein and various amino acid supplements prevent some of the muscle losses?

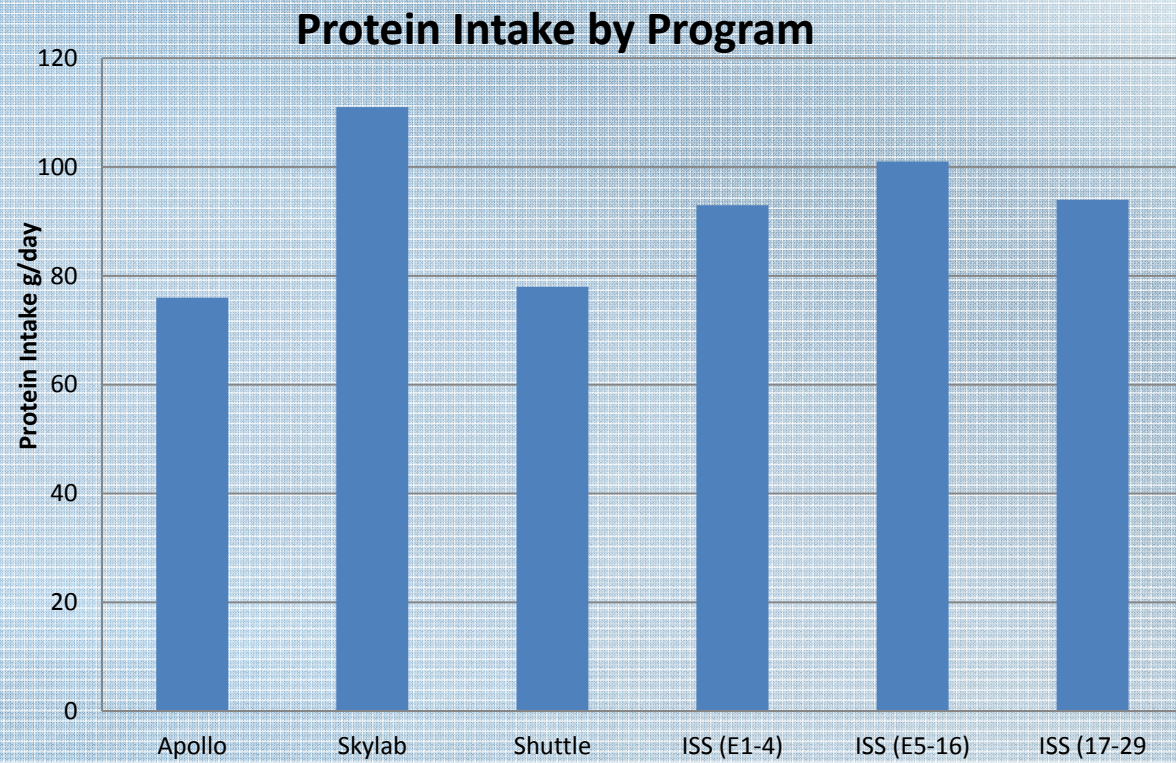
Research by Ferrando and Wolfe demonstrated no long term effect of branch chain amino acids liquid supplement on skeletal-muscle protein balance during supplement using simulated microgravity, bed rest.

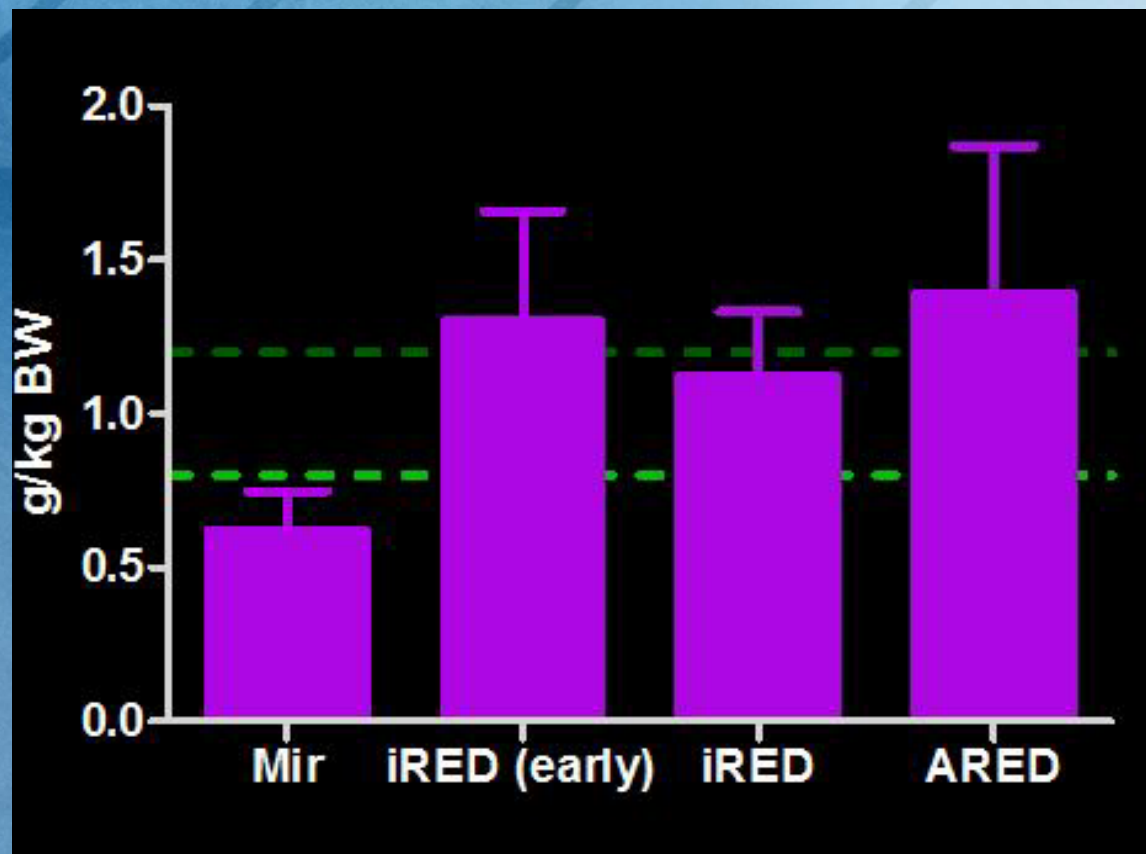
Effect of Energy Intake on Protein Synthesis



From: T. Stein, et al., 1999.

Protein Intake





Protein intakes per body weight over different types of Resistive Exercise

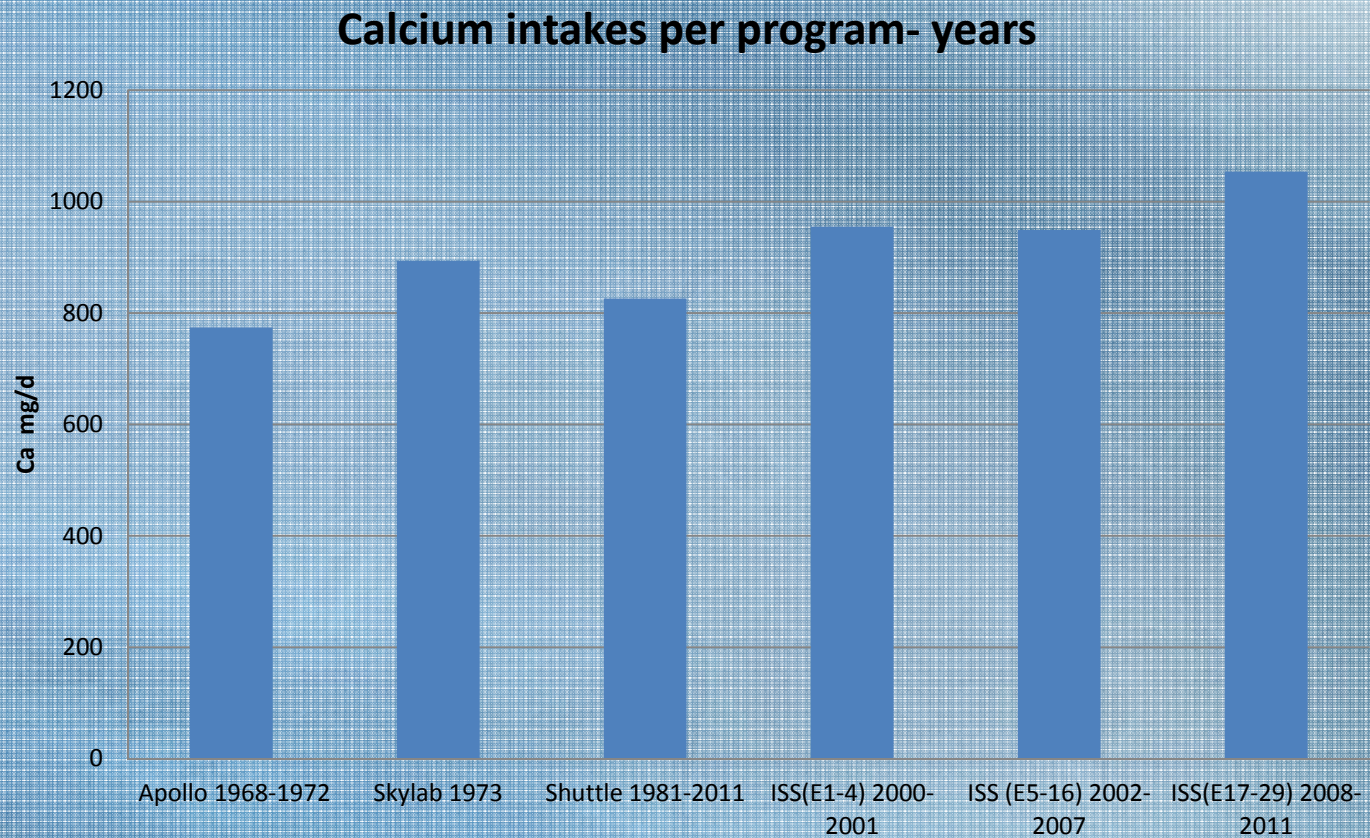
Mir is Russian Space Station

iRED is early resistive exercise equipment

ARED is initial resistive exercise equipment

ARED is the resistive exercise equipment now on ISS

Calcium Intakes per Program-years



Bone Health

Vitamin D status significantly decreases in space flight due to lack of sun

Measure of Bone resorption increased

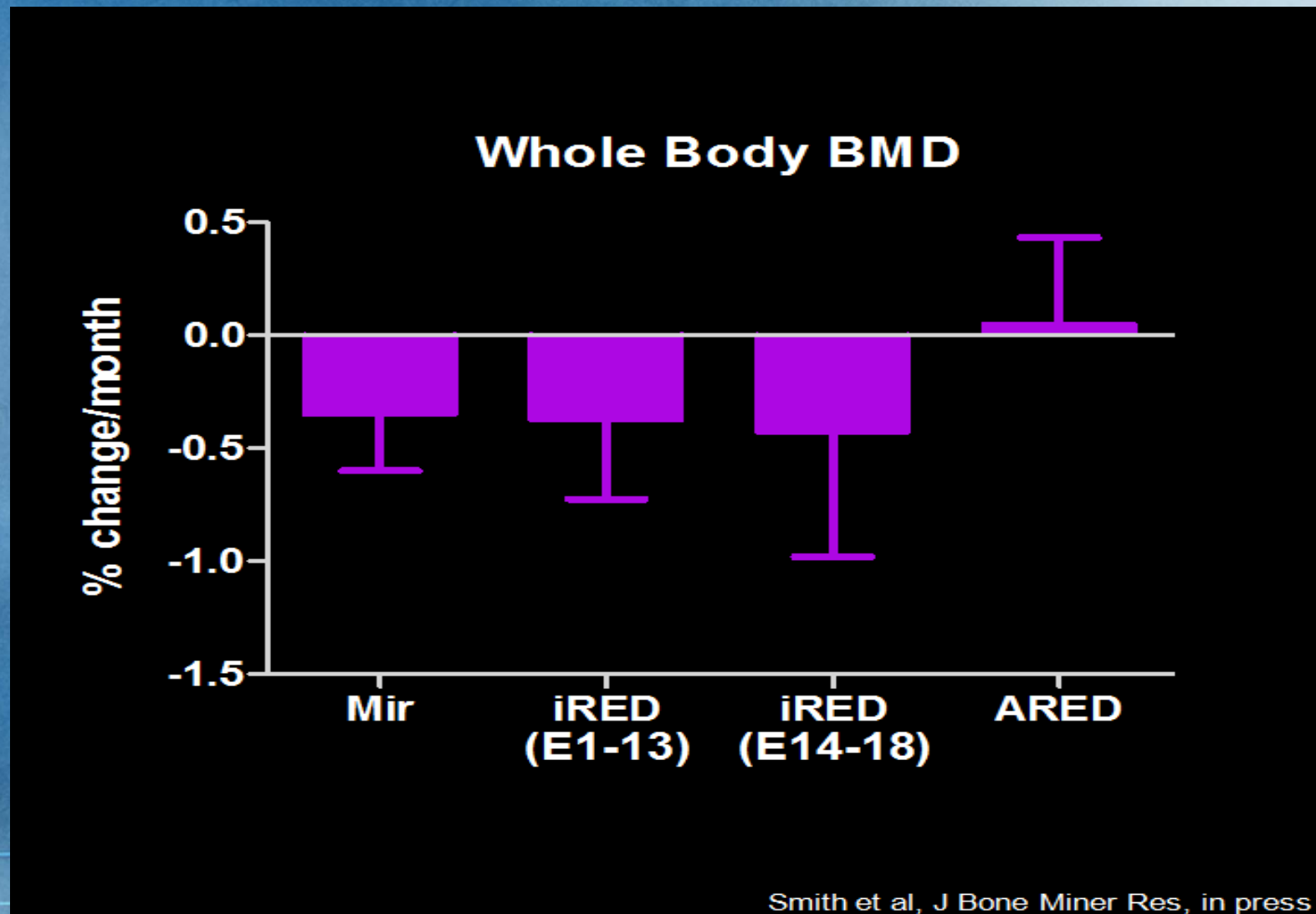
Blood levels of Calcium do not change, but urinary calcium increases

Interactions of the role of exercise, bone health and adequate nutrition

Exercise and Body Mass Measurements



Efficacy of Resistive Exercise on Bone Mineral Density (BMD)



Food Preparation and Dietary Monitoring



Dietary Intakes

In-flight dietary intake on Apollo, Skylab, and Shuttle.

	Apollo	Skylab	Shuttle
Protein intake, g/d	76 ± 19	111 ± 18	78 ± 19
Protein intake, % of kcal	16 ± 2	16 ± 2	15 ± 2
Carbohydrate intake, g/d	269 ± 49	413 ± 59	304 ± 67
Carbohydrate intake, % of kcal	58 ± 7	58 ± 9	58 ± 5
Fat intake, g/d	61 ± 21	83 ± 14	64 ± 18
Fat intake, % of kcal	29 ± 6	27 ± 9	27 ± 4

Modification of Sodium Content - 37% reduction

Shuttle and Early Space Station (ISS) Sodium Levels – 5600 mg/d for typical menu.

Modified 90 foods, thermostabilized and rehydratable of 200 foods.

Strategy – use commercial products and reduced Na equivalents or replace Na with other spices.

Spices – disodium inosinate, disodium guanylated to increase umami flavor in savory foods. Lemon juice, basil, oregano, sugar, Mrs Dash Fiesta Lime and Mrs Dash Garlic Herb Seasoning.

Sensory evaluation completed on all foods to determine acceptability with some needing to be reformulated. Final products all receive high scores on evaluations.

Modification of Sodium Content 40% reduction

ISSUES

Other foods high in sodium including

Russian – provides half of the ISS foods

Japanese

European

Bonus foods to enhance acceptability and personal preferences

International Space Station Foods

U.S. Foods

Russian Foods

International Community

Japan

Europeans

Canada

US Food Stored by boxes as pantry style

Set up as cycle menu 8 day

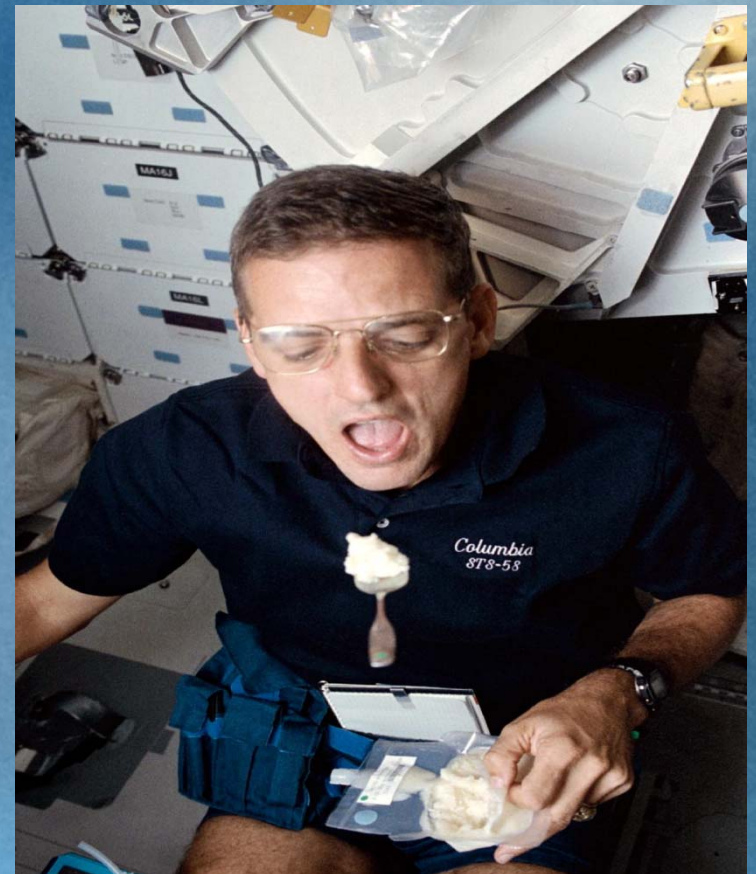
Bonus foods – 10%

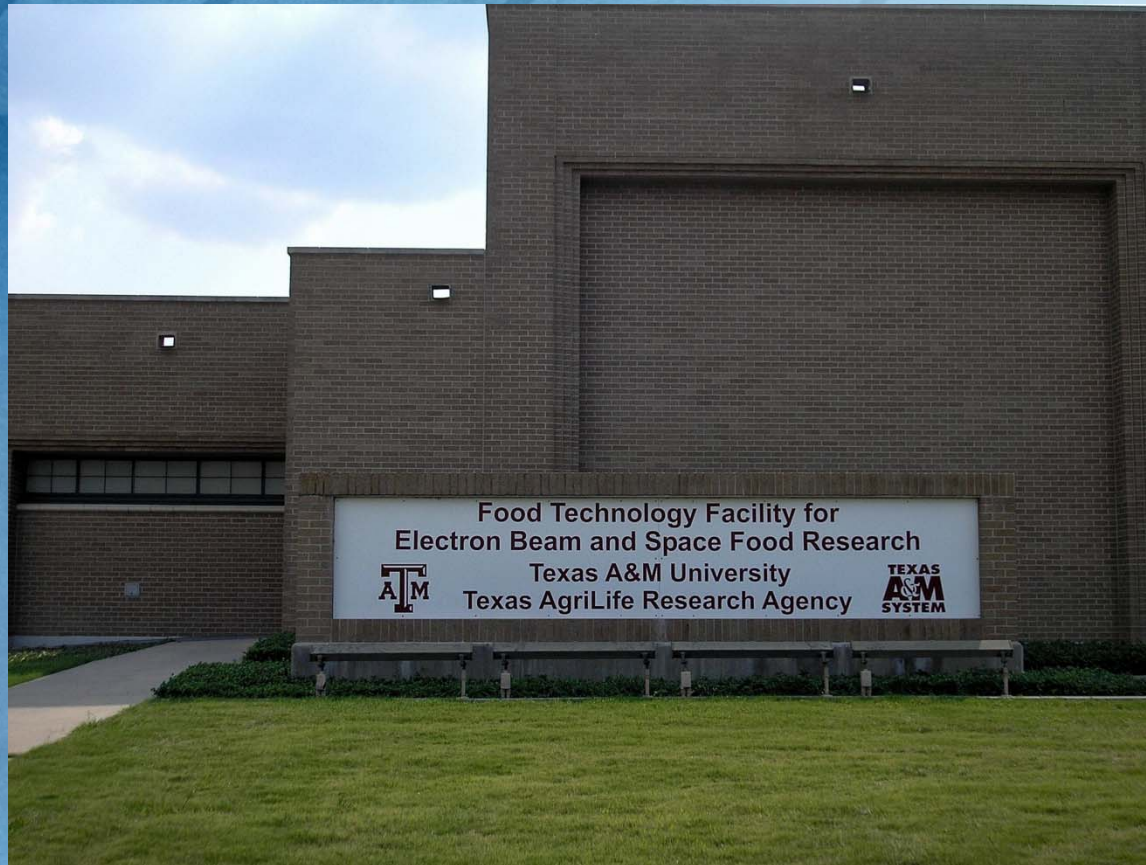
Allows crew members to chose their meal combination

Issues – expiration of foods



Foods on ISS





Texas A&M provides Thermostablized food

Summary and Conclusions

Between 1971 and 2011 learned the following:

- Energy intake to meet needs can be achieved, but unless there is good training and available food, it can be a problem
- There is no evidence to raise protein intakes for the short term flights of less than 2 weeks
- Weight loss is primarily due to a combination of lower water and energy intakes, but in general weight loss is less than 5% of body weight.
- Weight loss is not due to diuresis or changes in renal or cardiovascular adaptations to space flight

Questions answered through research on ISS

- Protein type and quality, is it important?
- Role of protein, minerals, exercise, and calcium on bone health during long duration space flight?
- Are there other medical issues related to diet such a vitamin metabolism, such as one carbon metabolism?
- During ISS, US foods are becoming lower in sodium, will this have any long term health effects?